



Attorney's Docket No.: 12732-166001 / US6611

ITW/TB

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Toru Takayama et al.
Serial No. : 10/662,508
Filed : September 16, 2003
Title : LIGHT-EMITTING APPARATUS AND FABRICATION METHOD OF THE
SAME

Art Unit : 2814
Examiner : Unknown

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

*Fee
only*

RESPONSE TO RESTRICTION REQUIREMENT

In response to the Restriction Requirement mailed October 25, 2004, please amend the above-referenced application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.

12/27/2004 YPOLITE1 00000074 061050 10662508
01 FC:1202 450.00 DA

12/27/2004 YPOLITE1 00000074 061050 10662508
02 FC:1251 120.00 DA

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

1066 2508

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20 =	
INDEPENDENT CLAIMS	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	122304	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	* 22	Minus	** 20 = 2
Independent	* 6	Minus	*** 4 = 2
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	*	Minus	** =
Independent	*	Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	*	Minus	** =
Independent	*	Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 - ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 - *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	395.00	OR	BASIC FEE	790.00
X\$25=		OR	X\$50=	
X 100=		OR	X 200=	
+ 180=		OR	+ 360=	
TOTAL		OR	TOTAL	

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$25=		OR	X\$50=	100
X 100=		OR	X 200=	400
+ 180=		OR	+ 360=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	500

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$25=		OR	X\$50=	
X 100=		OR	X 200=	
+ 180=		OR	+ 360=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$25=		OR	X\$50=	
X 100=		OR	X 200=	
+ 180=		OR	+ 360=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

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